## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Senate Majority PAC			
	C C00484642		
Check if 24-hour report 48-hour report New report Amends report filed	I on M M M / D = D / Y = Y = Y		
Full Name of Payee	Date of Public Distribution/Dissemination		
Dixon/Davis Media Group LLC	09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 1028 33rd St NW	Amount		
Ste 300	Allouit		
City State Zip Code	155.00		
Washington DC 20007-3571	Transaction ID: VN7GB9W6E17 Date of Disbursement or Obligation		
Purpose of Expenditure Media Production Costs - Estimate  Category/ Type	M = M / D = D / Y = Y = Y		
Name of Federal Candidate Support Office	e Sought: House District:		
Joni Ernst Oppose	President X Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought  Disbut 2014	ursement For: Primary X General  Other (specify) ▶		
Full Name of Payee			
Ralston Lapp Media	Date of Public Distribution/Dissemination  09 30 2014		
Mailing Address 1054 31st St NW			
Ste 430	Amount		
City State Zip Code	18935.45		
Washington DC 20007-6042	Transaction ID: VN7GB9W6E33 Date of Disbursement or Obligation		
Purpose of Expenditure Media Production Costs - Estimate  Category/ Type	M = M / D = D / Y = Y = Y		
Name of Federal Candidate Support Office	e Sought: House District:		
Thomas Cotton Oppose	President State: AR		
Calendar Year-To-Date Per Election for Office Sought  Disburged 2014	ursement For: Primary X General  Other (specify) ▶		
	Guier (speediy) >		
(a) SUBTOTAL of Itemized Independent Expenditures	19090.45		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not mount with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.			
2 410	10 02 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Signature			

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48		
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Senate Majority PAC	C C00484642		
Check if 24-hour report X 48-hour report New report Amends report filed	on Man / Dab / Yayayay		
Full Name of Payee SKDKnickerbocker	Date of Public Distribution/Dissemination		
	09 30 2014		
Mailing Address 1150 18th St NW	Amount		
Ste 800			
City State Zip Code Washington DC 20036-3845	13536.80		
	Transaction ID : VN7GB9W6E25  Date of Disbursement or Obligation		
Purpose of Expenditure Media Production Costs - Estimate  Category/ Type	M M / D D / Y Y Y Y		
Name of Federal Candidate Support Office	e Sought: House District:		
Scott Brown Oppose	President Senate State: NH		
Calendar Year-To-Date Per Election for Office Sought  Disbut 2014	ursement For: Primary		
Full Name of Payee	Date of Public Distribution/Dissemination		
Waterfront Strategies	09 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 3050 K St NW	09 30 2014		
Ste 100	Amount		
City State Zip Code	357727.00		
Washington DC 20007-5108	Transaction ID : VN7GB9W2E16 Date of Disbursement or Obligation		
Purpose of Expenditure Media Buy  Category/ Type	M = M / D = D / Y = Y = Y		
Name of Federal Candidate Support Office	e Sought: House District:		
Scott Brown Oppose	President State: NH		
2014	ursement For: Primary X General		
Per Election for Office Sought 1954627.82 2014	Other (specify) -		
(a) SUBTOTAL of Itemized Independent Expenditures	371263.80		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not mount with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•		
Bato	0 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Signature			

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	DENT EXPENDI	TORES		PAGE 3 OF 4 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)			l l	FEC IDENTIFICATION NUMBER ▼		
Senate Majority PAC				C C00484642		
Check if 24-hour report X 48-hour report	rt New repo	ort Amends repo		M / D D / Y B Y B Y		
Full Name of Payee Waterfront Strategies				f Public Distribution/Dissemination		
Ĭ Š				09 30 2014		
Mailing Address 3050 K St NW Ste 100			Amoun	t		
City	State	Zip Code		137537.00		
Washington	DC	20007-5108		action ID : VN7GB9W2E40  f Disbursement or Obligation		
Purpose of Expenditure Media Buy		Category/ Type		M / D D / Y Y Y Y		
Name of Federal Candidate		Support	Office Sought:	: House District:		
Joni Ernst		X Oppose	Preside	10		
Calendar Year-To-Date Per Election for Office Sought	30	075133.00	Disbursement 2014 Ott	For: Primary X General		
Full Name of Payee Waterfront Strategies				f Public Distribution/Dissemination		
Mailing Address 3050 K St NW			L	09 30 2014		
Ste 100			Amoun	nt		
City	State	Zip Code		10517.00		
Washington	DC	20007-5108		Transaction ID : VN7GB9W2MM9 Date of Disbursement or Obligation		
Purpose of Expenditure Media Buy		Category/ Type	М			
Name of Federal Candidate		Support	Office Sought	: House District:		
Joni Ernst		Oppose	Preside	nt Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought		3075133.00	Disbursement 2014 Ot	For: Primary X General her (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expe	enditures		· •	148054.00		
(b) SUBTOTAL of Unitemized Independent Ex	cpenditures		. •	7 7 7		
(c) TOTAL Independent Expenditures			<b>•</b>			
Under penalty of perjury I certify that the indewith, or at the request or suggestion of, any committee) any political party committee	candidate or authorized					
Rebecca Lambe	[Flectron	ically Filed] Date	M M /	02 / Y = Y = Y = Y		
Signature		Date	10	02 2014		

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 4 OF 4 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	C IDENTIFICATION NUMBER ▼			
Senate Majority PAC	C00484642			
Check if 24-hour report 48-hour report New report Amends report filed on	W / D = D / Y = Y = Y			
Waterfront Strategies				
Mailing Address 3050 K St NW Amount	30 2014			
Ste 100				
City State Zip Code	336997.00			
Date of D	cion ID: VN7GB9W4CC5 Disbursement or Obligation			
Purpose of Expenditure Media Buy  Category/ Type	M / D D / Y Y Y Y			
Name of Federal Candidate Support Office Sought:	House District:			
Thomas Cotton	Senate State: AR			
Calendar Year-To-Date Per Election for Office Sought  Disbursement For 2014  Other	or: Primary ⊠ General r (specify) ▶			
Full Name of Payee Date of F	Public Distribution/Dissemination			
Mailing Address  Amount				
City State Zip Code	7			
Date of [	Disbursement or Obligation			
Purpose of Expenditure  Category/ Type	M / D D / Y Y Y Y			
Name of Federal Candidate Support Office Sought:	House District:			
Oppose President	Senate State:			
Calendar Year-To-Date Per Election for Office Sought  Other	or: Primary General			
- Cuito				
(a) SUBTOTAL of Itemized Independent Expenditures	336997.00			
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 7 1			
(c) TOTAL Independent Expenditures	875405.25			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
[Electronically Filed] Date 10	02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Signature				